

MEASURE J
"REIMAGINE LA"



2021 SPENDING
RECOMMENDATIONS PROCESS

Measure J Diversion, Behavioral Health, and Health Subcommittee

Co-Chair Proposals For Subcommittee Funding Recommendations

March 2, 2020



SLATE #1

Ensuring Measure J Funding Can Be Accessed by Community-Based Organizations



Slate #1: Ensuring Measure J Funding Can Be Accessed by Community-Based Organizations

Recommendation #1:

Identify a Third Party
Administrator (*such as a
Foundation Partner*) to
Fund Community-Based
Organizations Directly

- a. “The Third Party Administrator should have expertise in Diversion, Behavioral Health and Health”
- b. Eligible CBOs must have an annual budget of less than \$1.5 million.
- c. CBOs in SPAs and zip codes of specific economic disadvantage and disproportionately impacted by LA County's carceral system must be prioritized.
- d. Third Party Admin must be accountable to an advisory board of impacted community members (like the Reentry Health Advisory Collaborative, RHAC)

Slate #1:

Ensuring Measure J Funding Can Be Accessed by Community-Based Organizations

Recommendation #2:

Eligible County Programs can submit proposals for Measure J funds

IF AND ONLY IF

AT LEAST 85% of the funding

is distributed DIRECTLY to CBOs.

- a. Eligible county programs must prioritize funding CBOs that have an annual budget of less than \$1.5 million.
- a. CBOs in SPAs and zip codes of specific economic disadvantage and disproportionately impacted by LA County's carceral system must be prioritized.
- a. Eligible county programs must standardize and streamline contracting RFPs across agencies to ease entry for providers.

ROLL CALL VOTE

How to Vote:

1. Say Your Name.
2. Say Your Vote: “Yay/Yes” OR “Nay/No” OR “I Abstain”

SLATE VOTING: One Vote for 2 recommendations:

Recommendation #1: Identify a Third Party Administrator (*such as a Foundation Partner*) to Fund Community-Based Organizations Directly

Recommendation #2: Eligible County Programs can submit proposals for Measure J funds IF AND ONLY IF AT LEAST 85% of the funding is distributed DIRECTLY to Community-based Organizations.



SLATE #2

Mental and Behavioral Health Diversion for Racial Justice and Marginalized People

**Prioritize Racial Justice and Mental
Health/Behavioral Health, Diverting the Eligible
4,000 people in LA County Jails to Community-
Based Care**



Slate #2: Prioritize Racial Justice and Mental Health/Behavioral Health, Diverting the Eligible 4,000 people in LA County Jails to Community-Based Care

For 2021-2022 Budget,
allocate \$200 million in Year 1
to immediately **expand existing and fund new CBOs and programs** that align with **11 specific ATI recommendations**, **adding at least 4,000 beds** that center justice-involved people and the most marginalized communities, **increasing service capacity** and **prioritizing people with mental and behavioral health needs.**

Slate #2: Prioritize Racial Justice and Mental Health/Behavioral Health, Diverting the Eligible 4,000 people in LA County Jails to Community-Based Care

HOUSING-Related Investments

- **HOUSING:#20 expand/refine affordable housing models for justice-involved people with MH/SUD needs)**
- **#21 create and scale up innovative housing programs with wraparound services;**
- **#22 develop partnerships that increase housing options and incentivize creation of housing options for people who identify as LGBTQ+ and/or TGI;**
- **#23 and #24 work with Housing State Funding and DHS Housing programs for people experiencing homelessness, mental health and/or substance use and people who identify as LGBTQ+ and/or TGI);**

Increase Support & Removing Barriers

- **#10 expand Medi-Cal, MHSA and/or support services for system-involved people and their families**
- **#31 remove barriers to treatment, employment and housing due to record of past convictions**
- **#59 Create a robust AB 1810 Diversion scheme—to identify early on persons eligible for diversion and develop pathways countywide to connect individuals to appropriate mental health programs;**
- **#88 fund comprehensive mental health and substance use care, as well as transitional housing with wraparound services**

Shifts to County Departments

#35* Significantly increase the number of DMH Psychiatric Mobile Response Teams (PMRTs) to respond to crisis

#43 train 911 dispatch on direct calls involving Mental and Behavioral Health crises to integrated DMH line ACCESS; allow callers to request a responder that connects to the gender identity of the individual in crisis

#92 use County capacity building programs with equity analysis to expand the system of care.

Must include at least **3,600 beds for community-based mental health care** and at least **400 beds for individuals with serious medical/SUD and/or housing needs.**

Total bed numbers should be expanded to 6,000 within 1.5 years

ROLL CALL VOTE

How to Vote:

1. **Say Your Name.**
2. **Say Your Vote:** **“Yay/Yes”** OR **“Nay/No”** OR **“I Abstain”**

SLATE VOTING:

Prioritize Racial Justice and Mental Health/Behavioral Health, Diverting the Eligible 4,000 people in LA County Jails to Community-Based Care

For 2021-2022 Budget, **allocate \$200 million in Year 1** to immediately **expand existing and fund new CBOs and programs** that align with **11 specific ATI recommendations**, **adding at least 4,000 beds** that center justice-involved people and the most marginalized communities, **increasing service capacity** and **prioritizing people with mental and behavioral health needs.**

SLATE #3:

Community-Inspired Funding Recommendations

**Vote to Take Place
Tuesday 3/9**

- **Funding Recommendation #4:** Fund Community-Based Organizations Providing Independent Pretrial Services that Will Help End Pretrial Incarceration
- **Funding Recommendation #5:** Diversion Triage and Safe Landing Center (Department of Health Services & Office of Diversion and Reentry)
- **Funding Recommendation #6:** Harm Reduction Program Expansion (Department of Health Services & Office of Diversion and Reentry)
- **Funding Recommendation #7:** Overdose Education Naloxone Distribution (Department of Health Services & Office of Diversion and Reentry)
- **Funding Recommendation #8:** SUD Court Based Diversion (Department of Health Services & Office of Diversion and Reentry)
- **Funding Recommendation #9:** Jail Booking Diversion (Department of Health Services & Office of Diversion and Reentry)



Fund Community-Based Organizations Providing Independent Pre-Trial Services that Will Help End Pretrial Incarceration

DESCRIPTION:

Funding **community based pretrial services** will provide support and resources to individuals pre-trial instead of law enforcement supervision, e-incarceration, and pretrial incarceration.

The primary functions of these community based service providers would be to: Conducting a **strengths and needs-based assessment** at the jail of all individuals in custody to determine a **plan of support** to get the individual released pre-trial; Sending court date reminders to all individuals with pending court dates; and Coordinating services in order to connect individuals with supportive resources.

\$50 million in Year 1 to fund Community-Based organizations providing independent Pretrial Services.

Diversion Triage and Safe Landing Center

Department of Health Services & Office of Diversion and Reentry

DESCRIPTION:

The Diversion and Safe Landing Center is a **proposed** project to accommodate persons who are acutely mentally or physically ill who are immediately discharged/released from jail on presumptive pre-trial diversion.

The site would act both as a **reception point/triage center and safe landing site.**

Ensures that vulnerable persons exiting LA County Jail in crisis are welcomed, oriented to necessary court follow-up, and **have their health and mental health needs appropriately assessed and triaged** to avoid unnecessary hospitalization or poor outcomes.

Site would **provide temporary accommodations** (bed, shower, meal, clothing, etc) to **ensure the person isn't being released from jail directly into homelessness**, and has the opportunity to be connected to eligible housing services and supports.

One-time budget:

\$5,000,000

Ongoing Budget:

23,300,00.



89.4%

of funding going to
Community-based
organizations

Harm Reduction Program Expansion

Department of Health Services & Office of Diversion and Reentry

DHS Harm Reduction Program Expansion (HRPE) will **provide DHS Housing for Health and ODR-contracted providers with trainings to expand their harm reduction knowledge to improve quality engagement with people who use drugs and people who engage in sex work.**

Additionally, HRPE will **maintain a clearinghouse of harm reduction supplies** to reduce the spread of HIV, HCV, promote and support wound care and overdose prevention.

These supplies will be available to the HFH, ODR staff, contracted providers and partners to distribute to their outreach contacts/ clients/ housing site residents or others they serve. This program will be d in partnership with a community based harm reduction organization with a strong commitment to peer staff and supporting individuals with lived experience of substance use, incarceration, homelessness and/ or sex work

One-time budget: \$2,705,26
Ongoing Budget: 2\$2,705,126

100%

of funding going to
Community-based
organizations

Overdose Education Naloxone Distribution (OEND)

Department of Health Services & Office of Diversion and Reentry

Provide overdose education and Narcan to people who are released from LAC jails, DHS providers and individuals in contact with DHS services. People leaving jails and prisons are 40-75 times more likely to die from an opioid overdose in the 2-4 weeks after release than the general population. Since Black and Latinx people are disproportionately incarcerated, this program addresses a racial equity gap in getting a life saving intervention to people who need it most. Expands education/narcan distribution to areas where there are few harm reduction services. A Naloxone Access Point (NAP) will be located in each SPA. The target population are individuals who are released from LA County jails, individuals in or leaving SUD treatment, individuals experiencing homelessness or at risk of homelessness, the reentry population, people who use drugs, and family/friends/acquaintances connected with any of the above populations and/or who are likely to be present at the scene of an overdose, and staff who work with any of the above populations.

100%

of funding going to
Community-based
organizations

One-time budget: \$1,587,000

Ongoing Budget: 6,057,696

Who is Eligible:

Individuals who use
drugs, and
family/friends/acquaintan
ces who are likely to be
present at the scene of
an overdose, and staff
who may also be
present at the scene of
an overdose

SUD Court Diversion & Jail Booking Diversion

Department of Health Services & Office of Diversion and Reentry

Individuals in station jails, courts or IRC with SUD will be diverted into harm reduction case management services in lieu of booking and prosecution. People of color with substance use needs are disproportionately represented among those who are incarcerated. This program will reduce racial disparities by diverting individuals away from jail and into community based harm reduction services.

Aligns with **ATI recommendation #16** to reduce the adverse impact that severity of substance use charges have on people.

85%

of funding going to
Community-based
organizations

Two Programs